Early ACCESS:

Iowa's system for implementation of the Individuals with Disabilities Education Act, Part C

Annual Report to the Governor



July 1, 2003- June 30, 2004

State of lowa **Department of Education**

Grimes State Office Building Des Moines, Iowa 50319-0146

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March 30, 2005

The Honorable Thomas Vilsack Governor Iowa State Capitol Des Moines, Iowa 50319

Dear Governor Vilsack:

On behalf of the Iowa Council for Early ACCESS, the State Interagency Coordinating Council created under Part C of the *Individuals with Disabilities Education Act*, I would like to present the Annual Report of the Council for the period from July 1, 2003 through June 30, 2004. As you know, the Council advises and assists the Department of Education to develop and implement policies to improve Iowa's interagency system of early intervention services that help families to promote the optimum development of their infants and toddlers with special needs.

This year we are sending you the full Annual Performance Report for the Early ACCESS system along with a summary of the Council's activities. The Annual Performance Report is also sent to the Secretary of the U.S. Department of Education. In a few weeks we will be sending you a summary document that highlights key points of the Annual Performance Report.

This past year, the Council advised and assisted the lead agency in five areas of focus: Comprehensive Child Find; Family Centered Services; Early Intervention Services in the Natural Environment; Early Childhood Transition; and General Supervision and Infrastructure

These efforts were intended to help improve the system's ability to identify children in need of services, provide family-centered services to them in their natural environments, and facilitate the successful transition of toddlers out of Early ACCESS in ways that continue to support their development.

We appreciate the opportunity to contribute to your Early Childhood Initiative by helping to build the capacity of Iowa's system to support infants and toddlers with special needs and their families. We look forward to continuing to work with you and all our state and community partners to achieve this goal.

As your Council, however, we must take this opportunity to express our serious concern about the erosion of the resources needed to continue the progress summarized in this annual report. Given Iowa's changing demographics, the federal contribution to Iowa's Part C program is shrinking. At the same time, state funding for critical components of the Early ACCESS infrastructure (e.g. Child Health Specialty Clinics) is also not keeping pace with growing needs. We greatly appreciate your advocacy for increased state appropriations for early childhood programs, including increased revenues to be targeted to Iowa's Medicaid program. Iowa's Early ACCESS system cannot be sustained without them.

Sincerely,

Robert Bacon, Chair Iowa Council on Early ACCESS

Early ACCESS:

Iowa's system for implementation of the Individuals with Disabilities Education Act, Part C

Annual Report to the Governor 2004

The Iowa Council for Early ACCESS presents this annual report to the Governor and the people of Iowa about the efforts of the Early ACCESS system that occurred July 1, 2003 through June 30, 2004.

Vision:

Every child, beginning at birth, will be healthy and successful.

The Early ACCESS system works to meet the developmental and health needs of children birth to age three who have developmental delays or specific conditions that are known to lead to

developmental delay. Early ACCESS is part of Iowa's larger early care, health, and education system that supports all young children.

Interagency Collaboration

Four state agencies work together through an interagency agreement to offer early intervention services to children and families:

- The Iowa Department of Education,
- Iowa Department of Public Health,
- Iowa Department of Human Services, and
- The University of Iowa's Child Health Specialty Clinics.

Together, state agencies identify, coordinate, and provide needed services and resources to eligible children to help families. They also contribute resources and efforts to improve the system.

Other Partners

Families, multiple regional and community agencies, as well as public and private providers also have a major role in making the system work.

Lead Agency

The Department of Education is the designated Lead Agency with fiscal and legal responsibilities for the Early ACCESS system.

To meet child and family needs the system:

- Works together in partnership with families,
- **❖** Is family centered,
- ***** Identifies needs early,
- **Promotes early intervention,**
- Promotes services in settings that are most natural to families, and
- * Respects cultural differences.

The Grantees

There are now twelve Area Education Agencies that have fiscal and legal responsibility for ensuring that the Early ACCESS system is carried out regionally. AEA 3 and 5 now are a part of Region 8 and AEA 2 and 6 are now a part of Region 7. AEA Directors of Special Education serve as the grantee administrator. Grantees and the regional partners work together to identify all eligible children and assure needed early intervention services are provided.

Early ACCESS Regional Grantees

AEA 1 Keystone Elkader AEA 4 Sioux Center AEA 7 Area 267 Marshalltown AEA 8 Prairie Lakes Fort Dodge AEA 9 Mississippi Bend Bettendorf AEA 10 Grant Wood Cedar Rapids AEA 11 Heartland Johnston AEA 12 Western Hills Sioux City Council Bluffs **AEA 13 Loess Hills** AEA 14 Green Valley Creston AEA 15 Southern Prairie Ottumwa **AEA 16 Great River** Ft Madison

State Staff

The state staff team consists of consultants representing families and the partnering agencies.

Julie Curry State Early ACCESS Coordinator

Kay Leeper Council Facilitator

Linnie Hanrahan Secretary

Shelley Ackermann Parent Consultant

Carrie Fitzgerald Department of Public Health Consultant (until Feb 2004)
Erin Kongshaug Department of Public Health Consultant (began Feb 2004)

Barbara Khal Child Health Specialty Clinic Consultant
Marion Kresse Department of Human Services Consultant

Lisa Sharp Parent Consultant

Kathryn Wilson Comprehensive System of Personnel Development

Consultant

Dann Stevens Medicaid Consultant

State Interagency Coordinating Council

The Iowa Council for Early ACCESS (ICEA) is Iowa's state interagency coordinating council for Early ACCESS. Twenty eight members appointed by the Governor advise and assist the lead agency, the Iowa Department of Education, about Iowa's Early ACCESS system. Council meetings are held on the third Friday of September, November, January, March, and May in the Des Moines area and are open to the public. The Executive Committee guides the activities of the Council and sets the agenda.

The following persons served on the ICEA in 2003 – 2004. Representatives with an asterisk (*) served as members of the Executive Committee.

Iowa Council for Early ACCESS Membership 2003-2004

PARENTS

Kyla Alba Jennifer Gomez Troy McCarthy Bill Stumpf Maureen Schletzbaum Jan Mackey* Andree Lawler*

SERVICE PROVIDERS

Royann, Mraz M.D. Pediatrician
Glenn Baughman Mental Health
Debra Sixta M.D. Family Physician

Greg Titus Pediatric Nurse Practitioner
Glenn Grove* Area Education Agency
Cathy Ryba Part C Regional Coordinator

Renee Wallace Child Health, Title V

State Legislator

Open

Personnel Preparation

Robert Bacon * Chairperson

Head Start

Burian, Keri Early Headstart Diane Halverson Headstart **Signatory Agencies**

Lana Michelson* Department of Education
Jane Borst* Department of Public-Health
Jeff Lobas* Child Health Specialty Clinics
Jim Overland* Department of Human Services

Child Care Smoot, Sara

Health Insurance

Shellie Goldman Department of Human Services

Tribal Council Representative

Georgette Sanache Meskwaki Tribe

At Large Members

Joel Yates

Kristyn Bell Community Empowerment

Edward Loggins III JETT

Georgia Woodward

Council Activities:

This year the Council focused its efforts on two priority areas:

- Early identification birth to age one; and
- Financing the Iowa Early ACCESS system.

Early Identification Committee

The Council was concerned that less than 1% of children under age one were being referred into the Early ACCESS system. Because early intervention is the difference that helps infants and toddlers with disabilities succeed, the council believes it is imperative that infants be identified early and that intervention begins early as possible in the child's life. In response, the Early Identification committee was established to seek ways to increase the number of children birth to age one who are referred to Early ACCESS services.

Actions:

- 1. The Committee made the following recommendations designed to increase the awareness of system changes, their impact on infants, their families and providers, and to emphasize the importance of identification by age one for infants with potential developmental delay.
 - Support the central point of entry through a contract with COMPASS.
 - Disseminate information about the Early ACCESS System to families of infants, targeting minorities, foster parents and parents of children born under 2500 grams.

- Disseminate information about Early ACCESS system to providers of services to infants. The target audience should be public and private providers, including resident training programs and staff of newborn intensive care units.
- Assure that training for Early ACCESS liaisons, service coordinators or other grantee staff includes information on strategies for working with the medical community for system change.
- 2) The Committee responded to Child Abuse Prevention and Treatment Act (CAPTA) requirements by assisting the Lead Agency in the development of a brochure and letter to families of children who have a substantiated case of child abuse or who were placed in foster care

Resource Committee

The Resource committee was convened to identify sources of fiscal and other supports for Early ACCESS services in the state and to coordinate state resources of the interagency partners. It soon became apparent that there was a serious erosion of available resources needed to sustain services at current levels and to continue to improve the system.

Most Significant Issues Identified:

- Multiple barriers within the Early ACCESS system to participation by health care agencies;
- The need for clearer interpretation of natural environments;
- Lack of clarity between an early intervention service and "other service;"
- Private insurance coverage of early intervention services including *hawk-i*.

Committee Recommendations:

- Continue participation in Mental Health/Mental Retardation/Developmental Disabilities/ Brain Injury (MH/MR/DD/BI) Commission Children's system redesign;
- Look for a variety of ways to pursue state dollars to support the Early ACCESS system such as weighting, setting up a pool of state dollars for service coordination, and contracting for services;
- Continue to explore private insurance as a means of payment for services;
- Communicate with the Special Education Finance Task Force regarding concerns for funding Early ACCESS by the state;
- Pilot strategies to overcome barriers to health care participation in Early ACCESS with Child Health Specialty Clinics;
- Pursue a process for possible changes to the Infant & Toddler Medicaid program requirements.

The Council also continued efforts begun in fiscal year 2003:

1) Advise and Assist the Lead Agency

The Council provided advice to the Lead Agency for new procedures and guidelines for the early intervention system including:

- A revised process and forms for the Individual Family Service Plan (IFSP);
- Service coordination training modules with an interagency approach;
- Revised eligibility guidelines; and
- A focused monitoring process.

2) Advocate for State and Federal Policies that improve Services to Children and Families The changes in the Child Abuse Protection and Treatment Act (CAPTA) require the Department of Human Services to refer children under age three to Early ACCESS who have a substantiated case of abuse. Referral from DHS is the key to success of the requirement so that the potential for a developmental delay may be evaluated. The Council is working to coordinate the interagency agreement for the implementation of the changes in the law and to identify the fiscal and other supports needed to help identify children who need Early ACCESS or other services.

The work of the Mental Health, Mental Retardation, Developmental Disabilities, and Brain Injury (MH/MR/DD/BI) commission has implications for the Early ACCESS system, especially as it moves to the children's system. Members of the Executive Committee and Council are participating on the commission study committees and providing guidance for its recommendations.

The Council responded to new policy guidelines from the Centers for Medicare and Medicaid Services (CMS) that prevented reimbursement for Early ACCESS services from education-based providers. The policy changes were a result of reinterpretation of policy, not a legislative change, and the Council was concerned about the implications for how Early ACCESS services would be delivered to children and families. The Council communicated their concerns to Director Kevin Concannon and the Iowa congressional delegation. Guidelines from CMS now allow for services that lead to creation of an IFSP to be reimbursed retroactively.

3) Improve Council Structures and Functions

Efforts continue to improve the way the Council functions. Convening two priority committees provided more opportunity for members to participate in discussion and share expertise and proved to be a more efficient way to bring recommendations forward.

4) Build Leadership skills

The new structure provides more opportunities for members to lead the work of the council with less staff support. Parents particularly have more opportunities to provide leadership.

5) Build Diversity of the Council Membership

Each year the Membership committee seeks individuals for consideration for appointment to the Council. When filling open positions people are chosen to represent specific constituencies that meet federal requirements and represent the diversity of the state. In 2003 names forwarded included more males, especially fathers of children with developmental disabilities, minorities and persons from rural Iowa.

Council Future Plans

The Council looks forward to continuing to build its capacity to carry out the role of advising and assisting the lead agency in the implementation of the statewide system for children and families in Iowa. Activities for next year include:

- Provide recommendations to Congress and OSERS for development of regulations for implementation of IDEA 2004.
- Develop the capacity of the council to respond to public policy issues.
- Continue to build the capacity of the council to advise and assist the lead agency in their work.
- Continue to provide opportunities for parent leadership on the Council.

Challenges for the Early ACCESS System in 2005

As this year's report shows, system improvements in Early ACCESS have resulted in positive trends for children in Iowa. However, the Council is greatly alarmed by the erosion of resources that threatens the viability of our system. Our greatest challenge in the next year is to determine how to fund services for Iowa's families. Additional system challenges include:

- Increase the number of children served by the system birth to age one.
- Improve communication with providers and referral sources.
- Continue to develop interagency structures.
- Implement cross agency service coordination.
- Develop early learning outcomes in six areas for children birth to age three.
- Improve transition from Early ACCESS to School based services.

Acknowledgements

The Iowa Council for Early ACCESS wishes to thank the members of the Annual Report Committee for their efforts in preparing this report and the state staff for their work on the Annual Performance Report.

A special thanks for all the families, providers, and administrators who worked together to conduct and record their activities documented in this report.

Governor's Report Committee

Shanell Wagler, At Large – Community Empowerment, Chair Kyla Alba, Parent Dianne Halverson, Public Provider – Head Start Robert Bacon, Chair, Iowa Council for Early ACCESS Kay Leeper, Iowa Council for Early ACCESS Facilitator

Copies Available

Copies of this report and more in depth information can be found at:

http://www.state.ia.us/earlyaccess/reports.html or Contact: Early ACCESS at (515) 281-3021.